## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

0 400 1701

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			17				lг	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00		BASIC FEE	
TOTAL CHARGEABLE CLAIMS			\7 minus 20=		*			X\$ 9=		OR	X\$18=	<del></del>
INDEPENDENT CLAIMS			ე minus 3 =		*			X43=		OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT	ESENT				+145=		1	+290=	
*,11	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	L	TOTAL	30:5	OR	TOTAL	
		LAIMS AS A	MENDED - PART II					:	385	] 0,,	OTHER	THAN
(Column 1) (Column 2) (Column 3								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	$\prod$	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								+145= TOTAL		اما	TOTAL	
		(Column 1)		AD	DIT. FEE		JO. 1	ADDIT. FEE				
AMENDMENT B	•	CLAIMS REMAINING		(Colum	ST	(Column 3)		I	ADDI-		. I	ADDI-
		AFTER AMENDMENT		PREVIO	USLY	PRESENT		RATE	TIONAL		RATE	TIONAL- FEE
	Total	*	Minus	**	•	=	:	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	_	= .		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	· 🔲 📑	<b> </b>			Ī		
								145=		OR	+290=	
								.TOTAL DIT. FEE		OR ,	TOTAL ODIT FEE	
(Column 1) (Column 2) (Column 3)												
MEN	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLÝ	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		= .	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<b>(\$ 9=</b>		OR	X\$18=	
	Independent		Minus	***		=	<del>   </del>	(43=		·	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700=	
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
**	** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, ent r "3."								. (	OR A	TOTAL DDIT. FEE	
T	he "High st Num	ber Previously Paid	For" (Total or	Independen	t) is the l	ighest number	found	in th appr	priat box	in colu	mn 1.	